

Iowa Department of Human Services

Terry E. Branstad Governor Kim Reynolds Lt. Governor Charles M. Palmer Director

Christine Walters 1114 23rd Street West Des Moines, IA 50266

Dear Ms Walters,

This letter is in regards to the May 12, 2014 compliance check of your Category A, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

I highly recommend calling Child Care Resource and Referral at 1-800-722-7619 to assist you with complying with the requirements of the following list.

[110.5(1)a Numbers for police, fire, ambulance, poison information posted by phone.

| Poison Control: 1-800-222-1222 |
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| 110.5(1)a Numbers for each child's parent, physician, and a responsible person are accessible by the phone. |
| 110.5(1)b All medicines and poisonous, toxic, or otherwise unsafe materials are secured from access by a child. |
| You need to get a safety door knob for the closet door where you keep cleaning supplies. Any cleaners that are not locked up or protected with child proof items need to be up high and out of reach. You must also move the cat liter box to an isolated room or area where the children do not have any access to it. It cannot be outside in their play area. If you need to put it in a room that the children could get into, you will need to keep a baby gate up to prevent access. |
| 110.5(1)c First-Aid supplies are available and easily accessible in the home, outdoor play area, any vehicle used to transport children, and on field trips. |
| 110.5(1)c The first-aid kit is sufficient to address first aid related to minor injury or trauma and stored in an area not accessible to children. |
| 110.5(1)e All accessible electrical outlets are safely capped. |

110.5(1)h A safe outdoor play area is maintained in good condition throughout the year.

| Remove all spray paint cans and other items that could be toxic or flammable into your garage. | |
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| 110.5(1)j Emergency and disaster plans for fire and tornado are written and posted by primary and secondary exits. | |
| Reference the sample map in the packet that was provided to you. You can get on the county assessor's website and print off a floor plan of your home, making creating these maps easier | |
| 110.5(1)j The plans shall clearly map building evacuation routes in case of fire, a safe place indoors in case of tornado, and flood shelter areas. | |
| 110.5(1)k Fire and tornado drills are practiced monthly and documentation kept. | |
| There is a form in your packet where you can easily keep monthly track of practicing emergency drills and testing smoke detector batteries. It is suggested you keep this on your refrigerator or other visible place as an easy reminder to complete the tests. | |
| 110.5(1)l A safety barrier surrounds any heating stove or heating element. | |
| 110.5(1)m Has not less than one 2A 10BC rated fire extinguisher in a visible and readily accessible place on each child-occupied floor. | |
| 110.5(1)n Each smoke detector is tested monthly, and a record is kept for inspection purposes. | |
| 110.5(1)o Nonsmoking signs posted at every entrance of the home and in every vehicle used to transport children. Signs include telephone # for reporting complaints, and www.iowasmokefreeair.gov . | |
| Can be purchased at places such as Wal-Mart, Menards, Staples, etc. | |
| 110.5(1)s The provider has completed training in CPR for infants, toddlers, and children. Documentation of current certification is on file. | |
| Contact Child Care Resource and Referral at 1-800-722-7619 for assistance in locating CPR training and other needed trainings. | |
| 110.5(2) A provider file is maintained and contains: | |
| 110.5(2)b Certificates or training verification documentation for: | |
| 110.5(2)b Within the first three months of registration: | |

| 110.5(2)b Two hours of approved child abuse and neglect mandatory reporter training (and every 5 years thereafter.) |
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| This can be taken online, there is a website provided in your packet. |
| 110.5(2)b Certification by an approved trainer/organization in infant and child first-aid that includes mouth-to-mouth resuscitation. Certification will be maintained throughout period of registration. If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR. |
| Contact CCR&R at 1-800-722-7619. |
| ☐110.5(2)b During the first year of registration – 12 hours of approved training. At least six hours shall be in a group setting. Two of the twelve hours must be health and safety training. A specific training shall not be used to meet requirements more than one time every five years. |
| Contact CCR&R at 1-800-722-7619. |
| □110.5(2)b During the second year of registration and each succeeding year, twelve hours of approved training. At least six hours shall be in a group setting. If the provider has documentation of completing the ChildNet, PITC, or Beyond Business Basics series, these hours may be used to fulfill two year's training requirements, not including first aid and mandatory reporter training. A specific training shall not be used to meet requirements more than one time every five years. |
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| Contact CCR&R at 1-800-722-7619. |
| Contact CCR&R at 1-800-722-7619. 110.5(2)c An individual file is maintained for each staff assistant and contains: |
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| ☐ 110.5(2)c An individual file is maintained for each staff assistant and contains: The information listed below regarding assistants and substitutes is for your information; you were not out of compliance as you do not currently have anyone listed on your registration as an assistant/substitute. Please be advised that you cannot use household members who are not approved substitutes on your registration to watch the children by |
| The information listed below regarding assistants and substitutes is for your information; you were not out of compliance as you do not currently have anyone listed on your registration as an assistant/substitute. Please be advised that you cannot use household members who are not approved substitutes on your registration to watch the children by themselves during times when you are unavailable. |
| ☐ 110.5(2)c An individual file is maintained for each staff assistant and contains: The information listed below regarding assistants and substitutes is for your information; you were not out of compliance as you do not currently have anyone listed on your registration as an assistant/substitute. Please be advised that you cannot use household members who are not approved substitutes on your registration to watch the children by themselves during times when you are unavailable. ☐ 110.5(2)c A completed DHS Criminal History Record Check, form B, 595-1396 |
| □110.5(2)c An individual file is maintained for each staff assistant and contains: The information listed below regarding assistants and substitutes is for your information; you were not out of compliance as you do not currently have anyone listed on your registration as an assistant/substitute. Please be advised that you cannot use household members who are not approved substitutes on your registration to watch the children by themselves during times when you are unavailable. □110.5(2)c A completed DHS Criminal History Record Check, form B, 595-1396 □110.5(2)c A completed Request for Child Abuse Information, form 470-0643 □110.5(2)c A physician's signed statement of health and immunization status at the time of |
| □110.5(2)c An individual file is maintained for each staff assistant and contains: The information listed below regarding assistants and substitutes is for your information; you were not out of compliance as you do not currently have anyone listed on your registration as an assistant/substitute. Please be advised that you cannot use household members who are not approved substitutes on your registration to watch the children by themselves during times when you are unavailable. □110.5(2)c A completed DHS Criminal History Record Check, form B, 595-1396 □110.5(2)c A completed Request for Child Abuse Information, form 470-0643 □110.5(2)c A physician's signed statement of health and immunization status at the time of employment and at least every two years thereafter. □110.5(2)c Certification of two hours of approved training relating to identification and reporting |

| 110.5(2)d A completed Request for Child Abuse Information, form 470-0643 |
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| 110.5(2)d A physician's signed statement of health of at the time of employment and at least every two years thereafter. |
| 110.5(2)d Certification of two hours of approved training relating to identification and reporting of child abuse within 6 months of employment and repeated every 5 years. |
| 110.5(2)d Certification in infant and child first aid that includes mouth-to-mouth resuscitation. If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR. |
| 110.5(8) Children's Files |
| 110.5(8) An individual file is maintained for each child and updated annually or when there are changes. Each file contains: |
| You will need to make individual files with all of the following information in each child's file. You did have some of the information for some of the children, however, your files need to be reorganized. |
| □110.5(8)a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and telephone number. |
| 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency. |
| 110.5(8)c A signed medical consent from the parent authorizing emergency treatment. |
| □110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance. |
| 110.5(8)d For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian. |
| 110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually. |
| 110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical. |
| 110.5(8)f A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child |

| 110.5(8)g A signed and dated immunization certificate provided by the state department of public health. |
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| 110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since. |
| [110.5(8)i Written permission from the parent(s) for their child to attend activities away from the child development home. It must include times of arrival and departure, destination, and person(s) responsible for the child. |
| 110.5(8)j Injury report forms to document injuries requiring first aid or medical care. |
| 110.5(10) Substitutes |
| For your information. |
| 110.5(10)a All standards regarding supervision and care of children apply to substitutes. |
| \Box 110.5(10)b Except in emergency situations, the provider must inform parents in advance of the planned use of a substitute. |
| 110.5(10)c The substitute must be 18 years of age or older. |
| 110.5(10)d Use of a substitute is limited to: No more than 25 hours per month. An additional period of up to two weeks in a 12-month period. |
| 110.5(10)e The provider maintains a written record of the number of hours substitute care is provided, incl |
| Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations on or before |
| Based on the items out of compliance listed above, you will be required to have a re-check or follow-up visit to your home. This visit will occur on or after |
| Based on the items out of compliance listed above, a re-check or follow-up visit to your home is not necessary. However, it is essential you come into complete compliance with all Departmental regulatory mandates. Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section. |
| I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated |

regulatory rules.

| Please sign and date below, and return this form in the provided envelope by: | | |
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| X Signature | Date | |
| Please call me if you have any further questions. | | |
| Sincerely, | | |
| Maliago Crayyford | | |

Melissa Crawford
Child Development Home Compliance Checks
DHS, Dallas County
210 N 10th Street
Adel, IA 50003
(515) 993-1742 (ph)
515-725-2899 (fx)
mcrawfo@dhs.state.ia.us

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at (Text field for phone).

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html and you can sign up for training at https://ccmis.dhs.state.ia.us/trainingregistry/

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).